



Kaizen Event Report Out

State Medical Board

February 1, 2013

COMPLAINT INTAKE AND ROUTING TO RESOLUTION

POKE YOKE FOLK

“TAKE ONE KAIZEN AND CALL ME NEXT MONDAY”



TEAM MEMBERS

- Kay Rieve
- Nicole Weaver
- Barb Jacobs
- Judy Rodriguez
- Doug Edwards
- Kim Anderson
- Krista Tackett
- Ruth Pologruto
- Jennifer Hayhurst
- Rob Feldmann

Mike Miller
Angela Fields
Jeff Bradford
Sue Bigham
Danielle Bickers
Angela McNair
Bill Schmidt
Rebecca Marshall
Kathleen Peterson

STATE MEDICAL BOARD BACKGROUND INFO

The Medical Board's regulatory responsibilities include:

- Investigating complaints against applicants and licensees
- Taking disciplinary action against those who violate the public health and safety standards set by the General Assembly and the Medical Board.

STATE MEDICAL BOARD BACKGROUND INFO

The State Medical Board has jurisdiction over:

- allopathic physicians (M.D.)
- osteopathic physicians (D.O.)
- podiatric physicians (D.P.M.)
- physician assistants (P.A.)
- anesthesiologist assistants (A.A.)
- radiologist assistants (R.A.)
- acupuncturists (R.A.C.)
- massage therapists (L.M.T.)
- cosmetic therapists (C.T.)

LICENSURE RESPONSIBILITIES

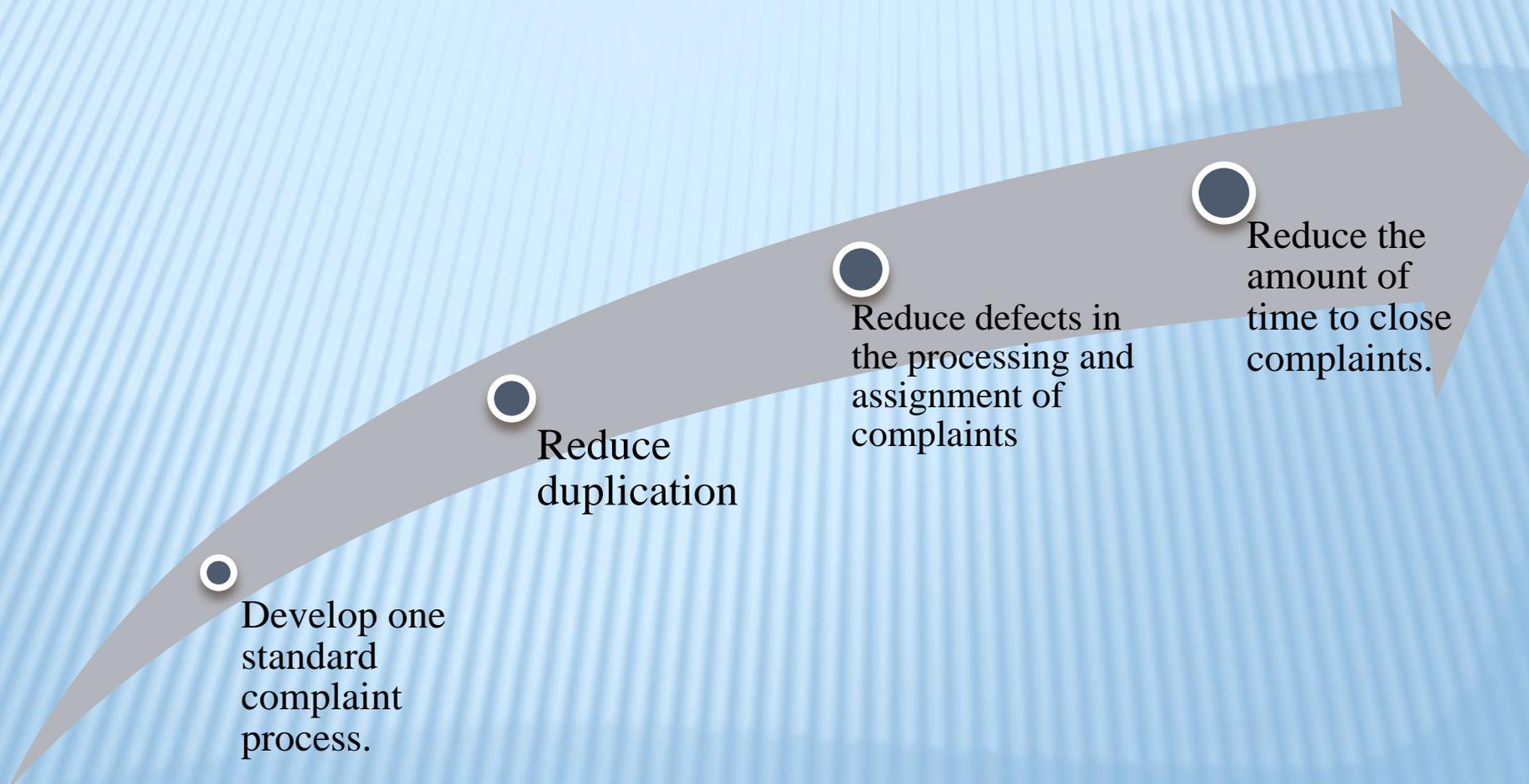
The licensure responsibilities of the Medical Board ensure that those practicing medicine and its limited branches meet sufficient standards of education, training, competency and ethics.

- In Fiscal Year 2012 a total of **63,144** Active Licensees Regulated by the Medical Board

STATE MEDICAL BOARD – WHY KAIZEN

- The complaint intake, processing, and routing process impacts the core functions of the Board (licensing and discipline).
- Errors in complaint intake, processing, and routing cause delays in licensing individuals, investigation, and resolution of complaints.
- Enhanced accountability to public, licensees, and staff concerning complaint intake, processing, and routing.

PROJECT GOALS



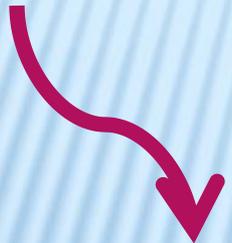
Develop one standard complaint process.

Reduce duplication

Reduce defects in the processing and assignment of complaints

Reduce the amount of time to close complaints.

SCOPE OF THE KAIZEN EVENT

- What is the process?
 - First Step: Complaint is filed (either from external or internal source)
 - Last Step: Complaint is Closed
- 

BARB

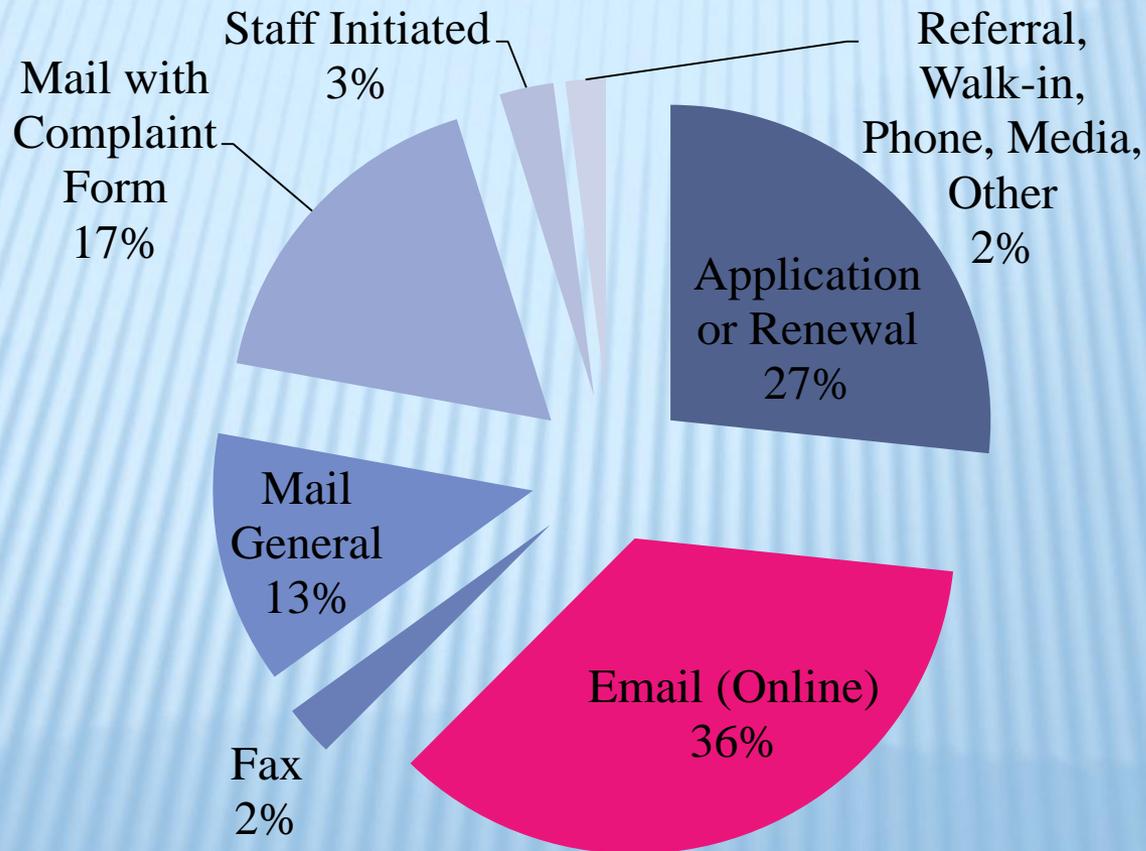
2011 COMPLAINTS

In 2011 the State Medical Board received 4533 complaints.

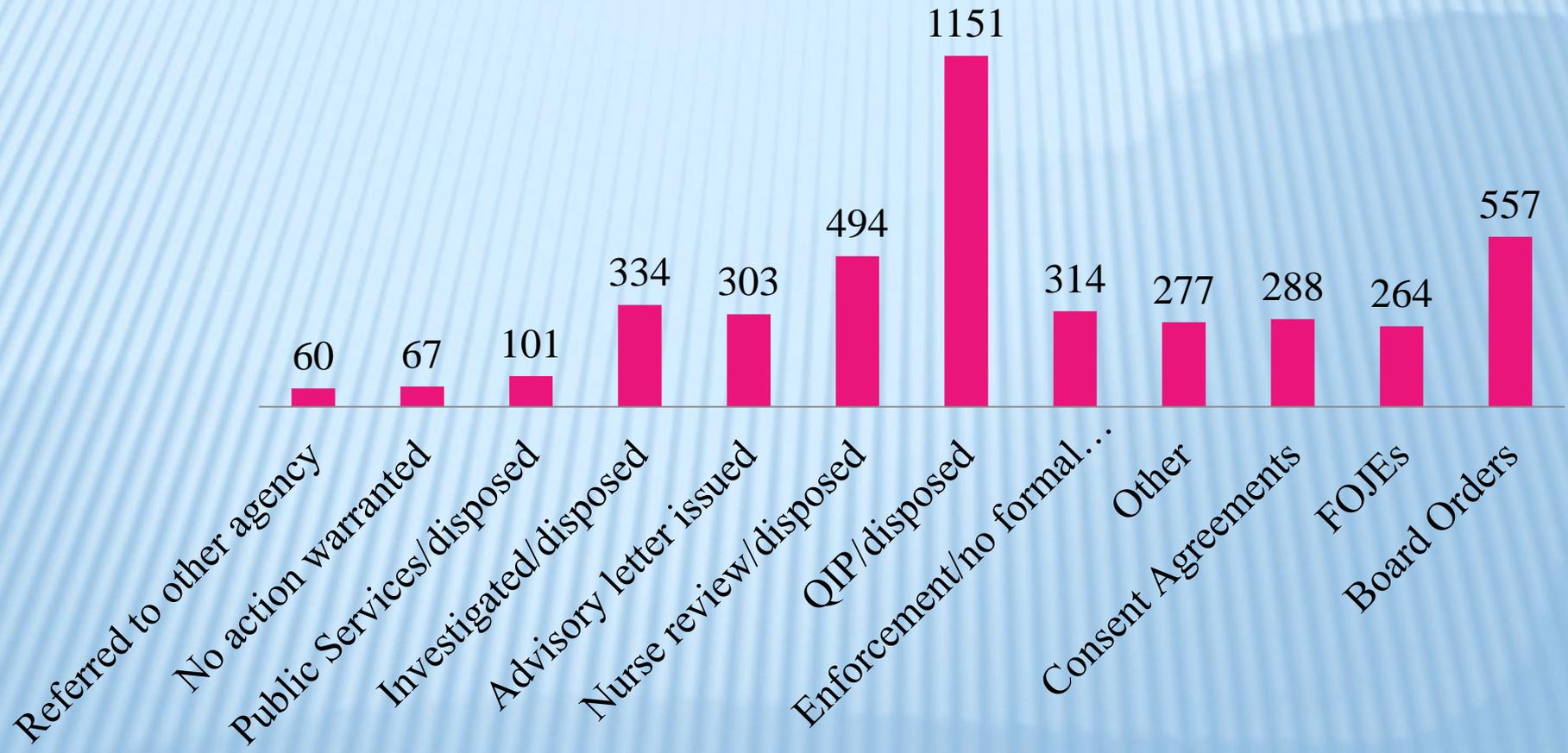


2011 HOW COMPLAINTS RECEIVED

Majority complaints received by Email/ Application-Renewal



2010 CLOSED COMPLAINT (DAYS) BY CLOSE CODE



2010 COMPLAINT TYPES – AVERAGE # DAYS



ROB

KAIZEN DEFINED

- Customer Focused
- Work level team
- One week
- Quick and Simple, action first
- Necessary resources available right away
- Immediate results, new process functioning by end of next week



THE KAIZEN APPROACH

Team-based energy and creativity drives immediate process improvement

DAY 1	DAY 2	DAY 3	DAY 4	DAY 5
Day of Learning and Level Setting:	Day of Discovery:	Day of Improvement:	Day of Design:	Day of Fine Tuning & Communication:
Getting everyone of the same page	Making the invisible visible	Creating the new process	Implementation & action planning	Celebration & sharing results

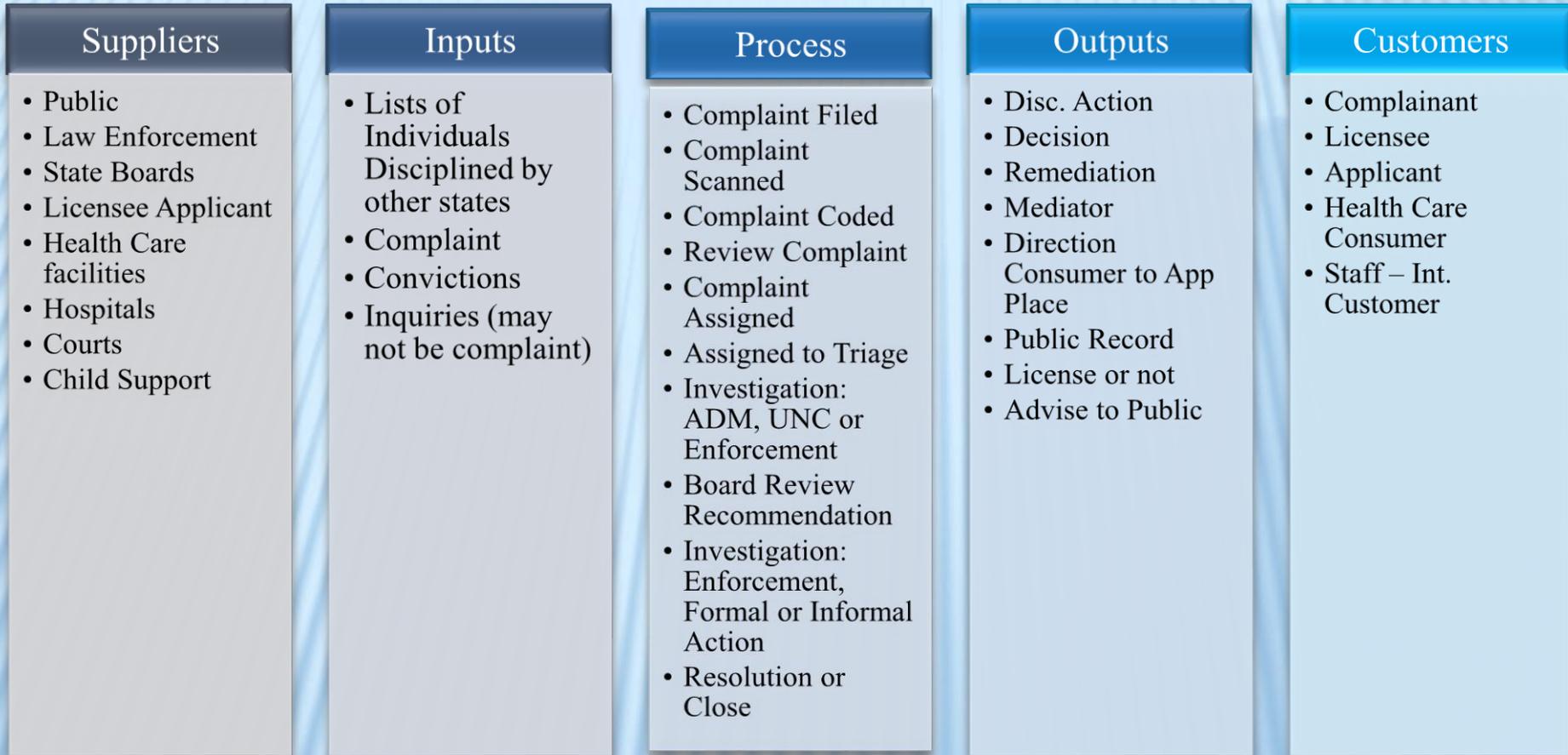
At the end of the week, each Kaizen team has designed dramatic operational improvements and plans for 30-60-90 day follow ups

OUT OF SCOPE

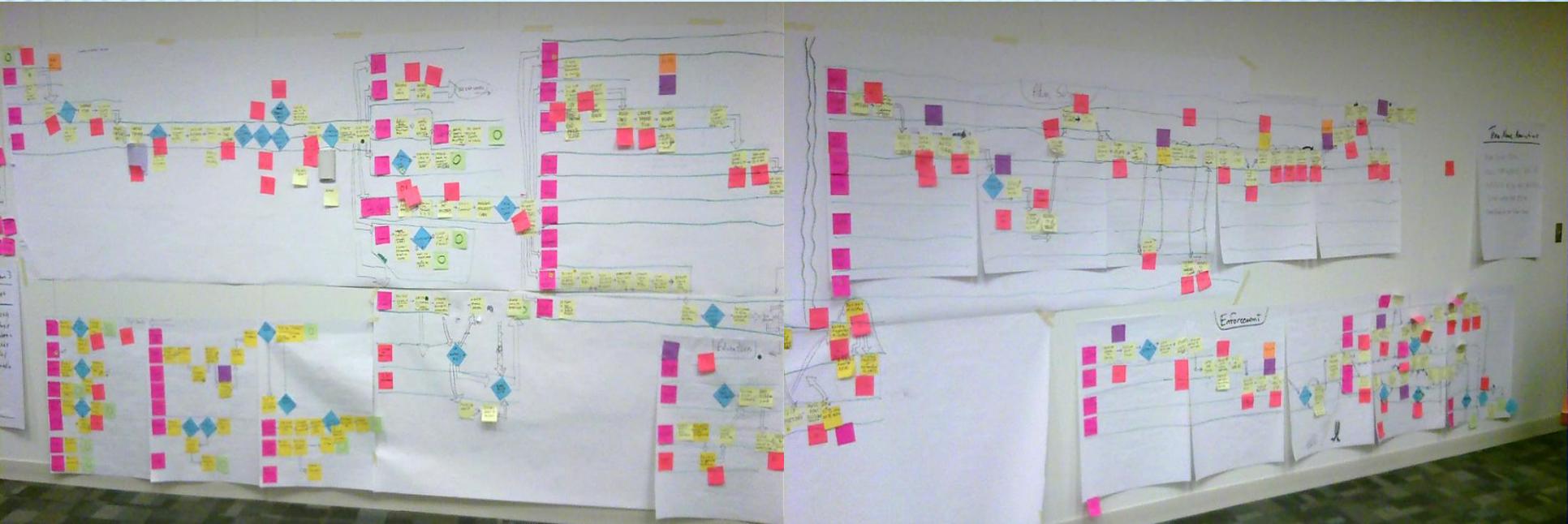
- No one loses their job because of the Kaizen event, although duties may be modified
- No additional staff
- No additional money
- No IT solutions until the process is improved
- No changes to laws or labor contracts

KAY

HIGH LEVEL PROCESS - SIPOC



CURRENT STATE



86 Points of Waste (TIM WOOD) identified

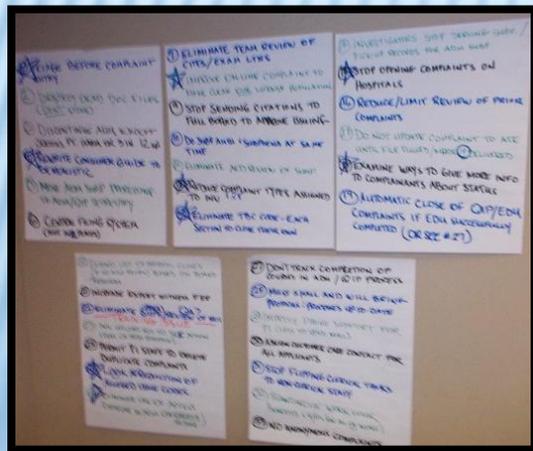
CURRENT STATE PROCESS MAP

- Too many steps – 32 Steps in Best Case Scenario
- Too many handoffs
- Too many delays
- Too many bridges
- Too many decisions
- Too much TIM WOOD – Found 86 of Points of Waste

DOUG

TEAM BRAINSTORMING

- Generated over 75 improvement ideas
- Categorized ideas based on “Impact” and “Control”

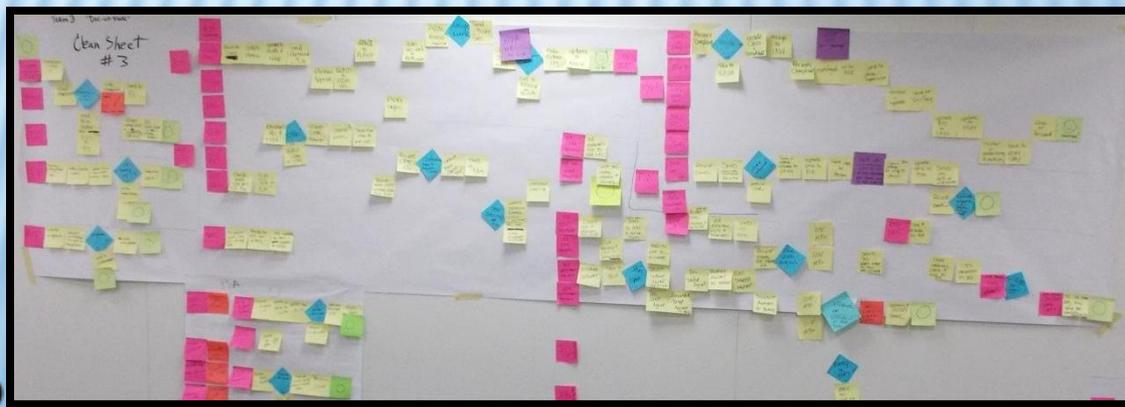
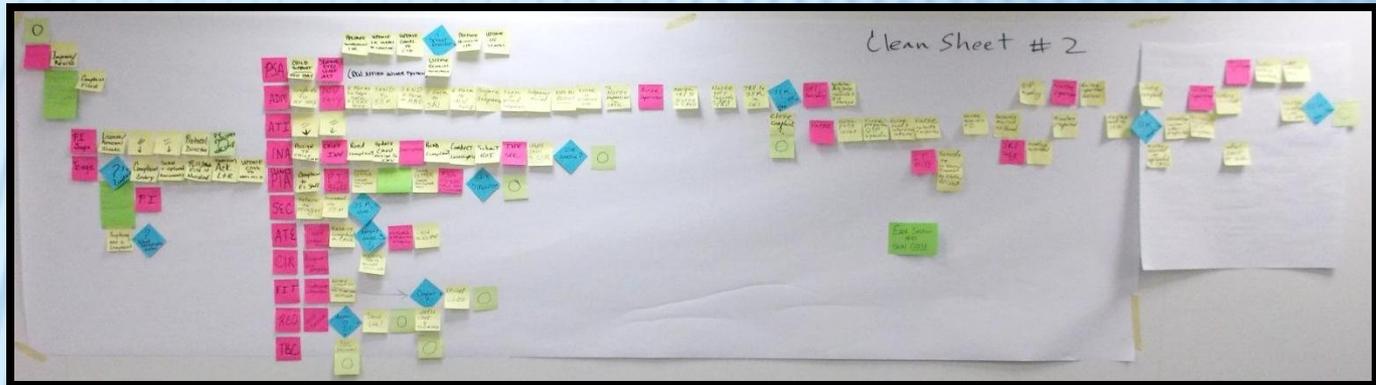
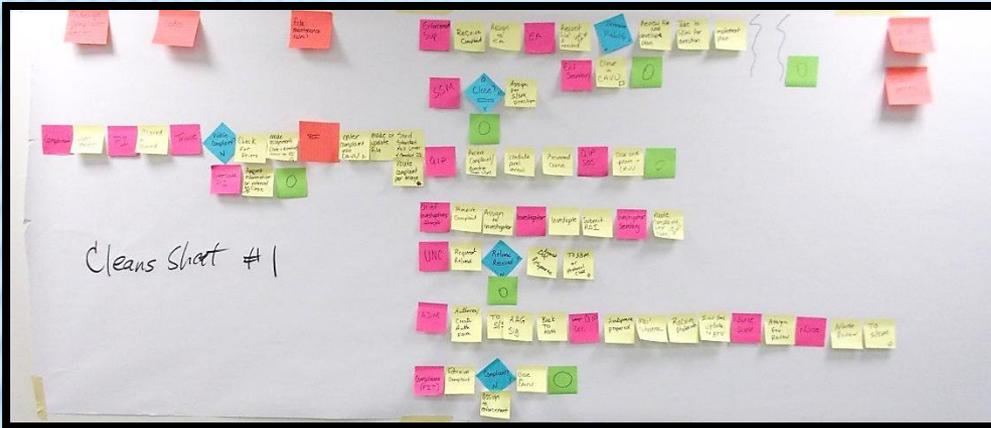


IDEAS

- × Moved Triage to Up Front
- × Mailing Subpoenas
- × Off-site Storage

JEFF

CLEAN REDESIGN - THREE TEAMS

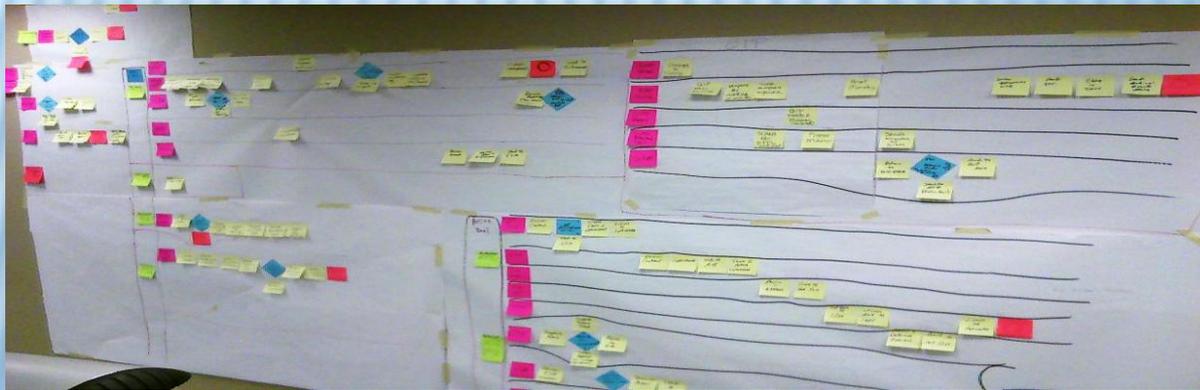
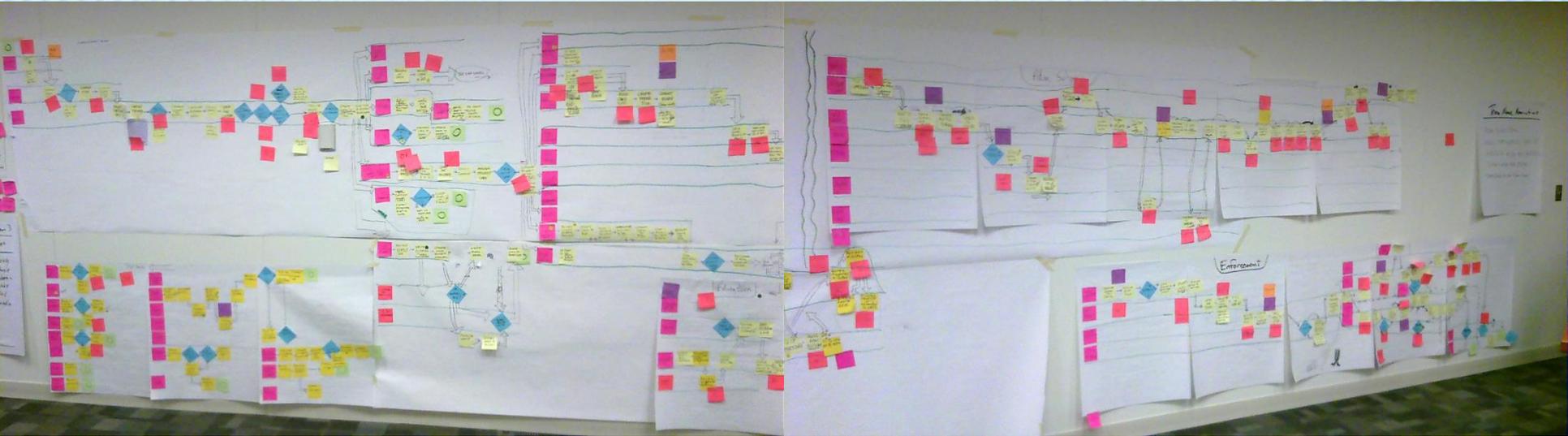


COMMON GROUND

- ✘ Electronic Subpoena Approval
- ✘ Eliminate TBC/Each section does their own closing
- ✘ One release letter for UNC/Protocol close if no response after 30 days

JUDY

BEFORE AND AFTER



REBECCA

SCORECARD

Measure	Current Level	NEW	Change
Process Steps Protocol close QIP Subpoenas	32 steps 113 steps 76 steps	3 steps 44 steps 28 steps	91% 61% 63%
Decision Points	31	15	50%
Process Lead Time Protocol close QIP Subpoenas	12-44 days 516-2027 days 174-987 days	3-17 days 133-334 days 43-154 days	

COST SAVINGS/AVOIDANCE

- **Protocol** - \$50,000 in average wages redirected
- **QIP** - \$200,000 in average wages redirected
- **Subpoenas** - \$90,000 in average wages redirected
 - **\$340,000 anticipated annual wages redirected**

MORE RESULTS

- Considerable Time Savings
- Cases Closed Faster
- Reduced Time on Non-Essential Tasks
- Cross Trained Staff
- Improved Communication; Internal and External
- Better use of technology
- Better utilization of staff skills
- Standardization of forms
- Uniform process

MAJOR IMPROVEMENTS MADE

Improve Communication	Redesign complaint form Redesign Consumer Guide Redesign Website
Cases Resolved Sooner	Streamlined subpoena process Eliminated redundancies
Reduces Processing Errors	Reversed order of triage to eliminate entry of matters not really a complaint Redesign triage form Reduced alleged issue codes

DANIELLE

IMPROVEMENT SUMMARY

Current Key Issues

Delay in processing

Delays causing backlog in closure process

Cumbersome subpoena process

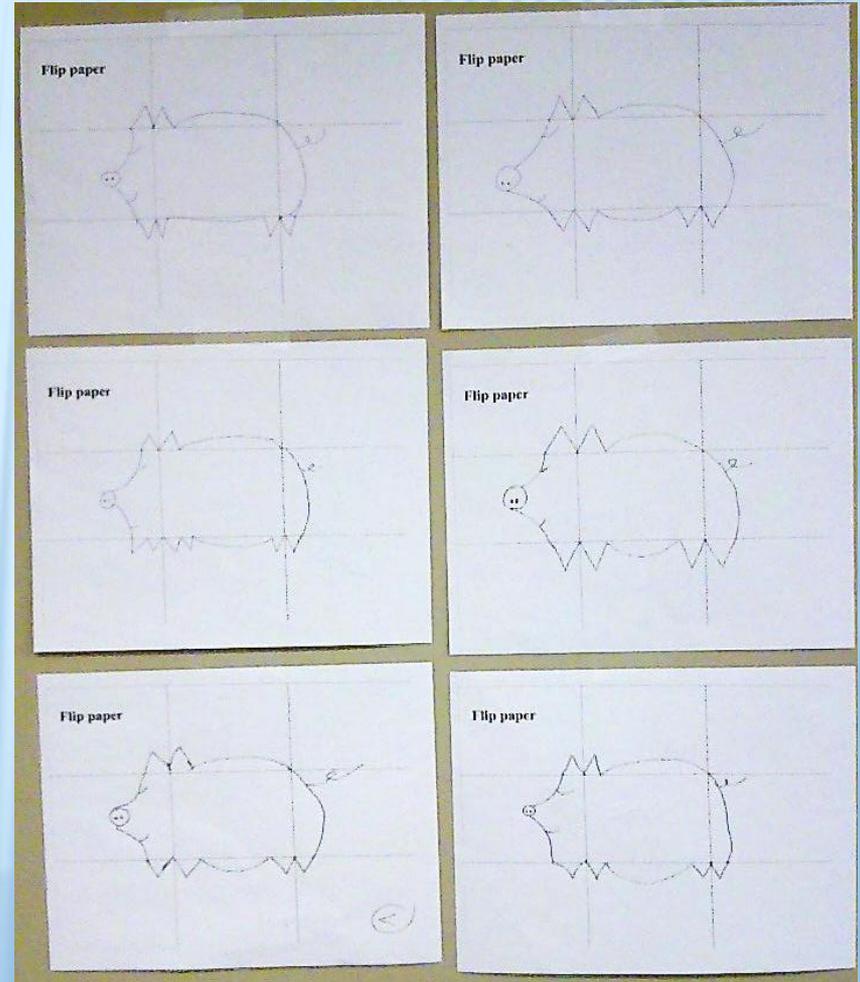
How We Improved

Triage Moved to Front of Process

Eliminate TBC ; allow each section to close

Eliminated duplication of reviews; created electronic process

STANDARDIZATION



ANGIE, SUE, NICOLE

THURSDAY WORK GROUPS

- Poke-Yoke Complaint Form
- Create New and Better Triage Form
- Review the Q/A thing
- Recommendations for Website
- Review Reduce Codes

ACTION REGISTERS

Suppliers

- Public
- Licensee/Applicant

Action Register
IT

What	Who	When
Define requirements	Sue, Ray, Nicole, Angie	1-31-13
Communicate reqs to IT staff	Mark B./Nicole	Sched by 2-8-13
IT Develop requirements/form	Contractor?	3-1-13
User Acceptance Testing/feedback to reqs from each department	MB Staff	6-1-13
Go Live!	—	6-30-13

Inputs

- Lists of individuals
- Background other sites
- Complaint

Consumer Information
Action Register

What	Who (lead)	When
update/review type	Angie F., Sue, Barbara	1/30/13
review	Angie/Bonnette	1/31/13
implement	Mike	1/31/13 2/4/13

Process

Complaint Processing Form
Action Register

What	Who (lead)	When
update	Angie, Kathy	1/31/13
Designed	Angie	1-31-13
Review	Mike	1-31-13
Implement	Carol	2-4-13

Customer

Complaint Licensee

Complaint form

What	Who (lead)	When
update	Nicole	1/30/13
Review	Mike	1-31-13
IT Create online version	IT	2-8-13
Form LVE	smb staff	2-15-13

Index

Color of font type

Type Code
Action Register

What	Who (lead)	When
review + update	Bill	1/31/13
REVIEW	KIM/MIKE	1/31/13
IMPLEMENT		2/8/13

ACTION REGISTERS

Training

Action Register
Training on Triage Process

What	Who	When
Create (definition) / initial draft process/procedure	Bill, Kathy, Mark Barr, Angie	2/22/13
review/approve		3/19/13
Launch training		3/29/13
implement		4/1/13

ACTION REGISTER

Communication Plan

WHAT?	OWNER	AUDIENCE	WHEN?
Report out / Fact Sheet	Patricia Team	Staff / Stakeholders	2-1-13
Report out / Fact Sheet	JW	Medical Board	Bye at Feb 2013 med board mtg
Fact Sheet	JW	Stakeholders	3-1-13
Fact Sheet / Info	Eric Day, M.M.	Budget Testimony Legislature	March 2011
Your Report / Info	JW	LICENSEES BOARD / LEGISLATURE	7-1-13
Status of Implementation	JW	Med Bd Staff	8-1-13

Inv. Backlog

Action Register

What	Who	When
Run Report 2010-Before	Judy	2-4-13
Create Process	Judy, Doug, Bill, Jeff	2-6-13
Implement	Investigators	3-1-13

Adm./QIP Backlog

Action Register

What	Who	When
Run Report	Kathy	1-31-13
Create Process	Kathy	1-31-13
Review	Kim / s-sm	2-14-13
Implement	Kathy	2-22-13 Pending QIP OK 2-28-13

Enf. Backlog

Action Register

What	Who	When
Run Report 2011-Before	Peter	2-4-13
Create Process	Pat, Rebecca, Angela	2-14-13
Implement	EAS	3-22-13

RUTH

BACK LOG REDUCTION PLANS

- ✘ Current process producing a backlog
 - + 112 investigations
 - + 190 QIP/ADM
 - + 200 Enforcement
- ✘ New Process anticipated will not contribute to backlog
- ✘ Specific plans in place to reduce each backlog
 - + 112 investigations – 90 days
 - + 190 QIP/ADM – 1 year
 - + 200 Enforcement – 18 months

MIKE

WHAT BEGINS MONDAY?

- Initial All-staff meeting
- Begin implementation of New Forms
- Begin up-front Triage Process
- Develop implementation teams

KRISTA, ANGELA, JENNIFER

LIFE AS A KAIZEN EVENT PARTICIPANT...



SPECIAL THANKS TO...

Senior Leadership:

- Kim Anderson, Ohio Medical Board

Team Leader:

- Mike Miller, Ohio Medical Board

Fresh Perspectives:

- Rob Feldmann, Ohio Department of Aging
- Jennifer Hayhurst, Ohio State Medical Association

QUESTIONS/COMMENTS



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